<u>. u</u>	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.												
L	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Application or Docket Number 9/1390434												
	CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY												
			KINGSER FILED		<u></u>	MUMBER EXTRA		RATE	FEE	1			
	CFEE OFR 1, (6(a))						1	MIE	1		RATE	FEE	
10	ALCIAIMS OFR 1.15(c)	_		minus 20			1	xs •		OR	** •	<u>'</u>	
1840	EPENDENT CLAS	WS .		cinus 3			1			OR			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	<u> </u>		OR	×			
							J	+1		OR	+5		
If the difference in column 1 is less than zero, enter 'T' in column 2. CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	L	
X	18/05	(Column			(Column 2)	(Column 3)		SMALL E	ENTITY _	OR		R THAN ENTITY	
ENT A		CLAIM REMAIN APTE AMENDA	ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	AZDI- TONAL FEE		RATE	ADCI- TIONAL FEE	
DME	Total prose uspy	10	7	Minus	70	•	1	× •\	/ rec	OR	X 5*	PEE	
ENDM	Independent (37 GFR L18(1))			Minus	18	3		x•	\	OR	x s=		
ARST PRESENTATION OF MULTIPLE DEPENDENT CLASM (37 CFR 1.16(d))							+s =	•	OR	+5			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
5	-2-06	(Calumn	1)		(Column 2)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
ENT 8		CLAIM REMAIN AFTE AMENDM	NG		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
I ≥	Total (37 CFR 1.14(st)	100	,	Minus	-107	• _		× 5 3		OR	x s =		
S I	independent profit LMO:b	17		. Minus .	18	-		x 8		OR	x s =	7	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 CFR 1.18(d))							+: .		OR	+s •		
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
03-26-07 (Column 1) (Column 2) (Column 3)													
NTC	SNS	CLAIM REMAIN AFTEI AMENDM	NG		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- HONAL PEE		RATE	ADDI- TIONAL FEE	
)ME	Total profesion	.8%		Minus	107	•		x s		OR	x :		
END	Independent pr CFR 1,180g)	13		Minus	18	•		x \$_=		OR	x 5/-		
AM	FIRST PRESENT	ATION OF M	ATIPLE	DEPENDE	ENT CLARK (STC	FR 1.16(6))		/· <u>,_</u> .		OR	/· •_ •	•	
- 1	1,86,210,232,249,251,253,255									OR	TOTAL ADO'L FEE		
If the entry in column 1 is less than the entry in column 2, write "O' in column 3. "If the "fighest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20".													
"If the Tighest Number Previously Paid For' (N THIS SPACE is less than 3, order "2". The Tighest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1,													
This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete.													
includ	ng gathering, pro	ipering, and	submit	ting the c	ompleted application and/or sugg	tion form to the	USI	PTO, Time will va	ry depending	upon the	individual case.	Апу сопплелов	

and Indemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

263, 274 If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2 274, 278, 280